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CONFIRMATION NO. 6289

<b>SERIAL NUMBER</b> 10/015,030	<b>FILING OR 371(c) DATE</b> 12/11/2001 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2637	<b>ATTORNEY DOCKET NO.</b> 026-0013
<b>APPLICANTS</b> Philip David Steiner, Montreal, CANADA; Michael H. Perrott, Cambridge, MA; Vadim Gutnik, Austin, TX;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/302,912 07/03/2001				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/28/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 43
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> 22120				
<b>TITLE</b> Method and apparatus for determining a loss of signal condition				
<b>FILING FEE RECEIVED</b> 1406	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	